



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3781

SERIAL NUMBER 10/602,986	FILING DATE 06/25/2003  RULE	CLASS 713	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. A-9233
-----------------------------	---------------------------------------	--------------	------------------------	----------------------------------

## APPLICANTS

Anthony J. Wasilewski, Alpharetta, GA;

Howard G. Pinder, Norcross, GA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/930,901 08/16/2001 PAT 6,937,729  
 which is a CON of 09/487,076 01/19/2000 PAT 6,292,568  
 which is a CON of 09/126,783 07/31/1998 ABN  
 which claims benefit of 60/054,575 08/01/1997  
 and is a CIP of 09/111,958 07/08/1998 ABN  
 which claims benefit of 60/054,578 08/01/1997  
 and is a CIP of 08/767,535 12/16/1996 PAT 6,005,938  
 and is a CIP of 08/580,759 12/29/1995 PAT 5,870,474  
 which claims benefit of 60/007,962 12/04/1995  
 and is a CIP of 08/415,617 04/03/1995 PAT 5,742,677

not granted for  
priority date

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/10/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	GA	21	27	3

Examiner's Signature *[Signature]* Initials *TSC*

11/02/05

## ADDRESS

05642  
 SCIENTIFIC-ATLANTA, INC.  
 INTELLECTUAL PROPERTY DEPARTMENT  
 5030 SUGARLOAF PARKWAY  
 LAWRENCEVILLE, GA  
 30044

## TITLE

Method for partially encrypting program data

<b>FILING FEE</b>  <b>RECEIVED</b> <b>876</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
--	---	--